

**PERSONAL FINANCIAL STATEMENT****FORM PFS  
COVER SHEET**

Filed in accordance with chapter 572 of the Government Code.  
For filings required in 2009, covering calendar year ending December 31, 2008.  
Use FORM PFS--INSTRUCTION GUIDE when completing this form.

TOTAL NUMBER OF PAGES FILED:

ACCOUNT #

20990

1 NAME

TITLE; FIRST; MI

Mr. Royce

NICKNAME; LAST; SUFFIX

Senator West

2 ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

320 South R.L. Thorton Freeway  
Suite 300  
Dallas, Texas 75203

☐ (CHECK IF FILER'S HOME ADDRESS)
3 TELEPHONE  
NUMBER

AREA CODE

PHONE NUMBER; EXTENSION

[REDACTED]

4 REASON  
FOR FILING  
STATEMENT
☐ CANDIDATE \_\_\_\_\_ (INDICATE OFFICE)

☒ ELECTED OFFICER Texas State Senator, District 23 (INDICATE OFFICE)

☒ APPOINTED OFFICER Member, Texas Emancipation Juneteenth Commission (INDICATE AGENCY)

☐ EXECUTIVE HEAD \_\_\_\_\_ (INDICATE AGENCY)

☐ FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT

☐ STATE PARTY CHAIR \_\_\_\_\_ (INDICATE PARTY)

☐ OTHER \_\_\_\_\_ (INDICATE POSITION)

5 Family members whose financial activity you are reporting (filer must report information about the financial activity of the filer's spouse or dependent children if the filer had actual control over that activity):

SPOUSE Carol Richard West

DEPENDENT CHILD 1. [REDACTED]

2. \_\_\_\_\_

3. \_\_\_\_\_

In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child if you had actual control over that person's financial activity.

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

39

R: 416582

**SOURCES OF OCCUPATIONAL INCOME****PART 1A**☐ NOT APPLICABLE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1</b> INFORMATION RELATES TO	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>2</b> EMPLOYMENT <input type="checkbox"/> EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check if Filer's Home Address)  West & Gooden P.C. 320 S.R.L. Thornton Freeway Suite 300 Dallas, TX 75203  Senior Partner, Attorney
<input checked="" type="checkbox"/> SELF-EMPLOYED	NATURE OF OCCUPATION Senior Partner, Attorney
INFORMATION RELATES TO	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check if Filer's Home Address)  State of Texas Senate State Capital 1400 N Congress, Ave. Rm 1E.15 Austin, TX 78701  State Senator
<input type="checkbox"/> SELF-EMPLOYED	NATURE OF OCCUPATION State Senator
INFORMATION RELATES TO	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
EMPLOYMENT <input type="checkbox"/> EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check if Filer's Home Address)  West & Associates LLP 320 S.R.L. Thornton Freeway Suite 300 Dallas, TX 75203  Attorney
<input checked="" type="checkbox"/> SELF-EMPLOYED	NATURE OF OCCUPATION Legal

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**SOURCES OF OCCUPATIONAL INCOME****PART 1A**☐ NOT APPLICABLE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

**1** INFORMATION RELATES TO☒ FILER☐ SPOUSE☐ DEPENDENT CHILD \_\_\_\_\_**2** EMPLOYMENT☐ EMPLOYED BY ANOTHER

NAME AND ADDRESS OF EMPLOYER / POSITION HELD

☐ (Check if Filer's Home Address)

Royce West &amp; Associates P.C.

320 R.L. Thornton Freeway  
Ste 300  
Dallas, TX 75203☒ SELF-EMPLOYED

NATURE OF OCCUPATION

Legal

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**RETAINERS****PART 1B**☐ NOT APPLICABLE

This section concerns fees received as a retainer by you, your spouse, or a dependent child (or by a business in which you, your spouse, or a dependent child have a 'substantial interest') for a claim on future services in case of need, rather than for services on a matter specified at the time of contracting for or receiving the fee. Report information here only if the value of the work actually performed during the calendar year did not equal or exceed the value of the retainer. For more information, see FORM PFS - INSTRUCTION GUIDE

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<b>1</b> FEE RECEIVED FROM	NAME AND ADDRESS  Texas Instruments  12500 TI Boulevard Dallas,, TX 75243
<b>2</b> FEE RECEIVED BY	NAME OF BUSINESS  <input checked="" type="checkbox"/> FILER OR FILER'S BUSINESS West & Associates, LLP  <input type="checkbox"/> SPOUSE OR SPOUSE'S BUSINESS  <input type="checkbox"/> DEPENDENT CHILD OR CHILD'S BUSINESS
<b>3</b> FEE AMOUNT	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**STOCK****PART 2**☐ NOT APPLICABLE

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

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<b>1 BUSINESS ENTITY</b>	NAME Reach Media, Inc			
<b>2 STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD ____	
<b>3 NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input checked="" type="checkbox"/> 10,000 OR MORE		
<b>4 IF SOLD</b>	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE		
	<input type="checkbox"/> NET LOSS			

<b>BUSINESS ENTITY</b>	NAME Radio One			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD ____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input checked="" type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE		
	<input type="checkbox"/> NET LOSS			

<b>BUSINESS ENTITY</b>	NAME Time Warner			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD ____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE		
	<input type="checkbox"/> NET LOSS			

<b>BUSINESS ENTITY</b>	NAME VM Ware Inc., Class A			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD ____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input checked="" type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input checked="" type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE		
	<input checked="" type="checkbox"/> NET LOSS			

<b>BUSINESS ENTITY</b>	NAME Walmart			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD ____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input checked="" type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE		
	<input type="checkbox"/> NET LOSS			

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**STOCK****PART 2**☐ NOT APPLICABLE

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<b>1 BUSINESS ENTITY</b>	Pegasus Bank <span style="float: right;">NAME</span>			
<b>2 STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>3 NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input checked="" type="checkbox"/> 10,000 OR MORE		
<b>4 IF SOLD</b>	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE		
	<input type="checkbox"/> NET LOSS			

<b>BUSINESS ENTITY</b>	CT Holdings, Inc. <span style="float: right;">NAME</span>			
<b>STOCK HELD OR ACQUIRED BY</b>	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input checked="" type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE		
	<input type="checkbox"/> NET LOSS			

<b>BUSINESS ENTITY</b>	CDSS Wind Down Inc. <span style="float: right;">NAME</span>			
<b>STOCK HELD OR ACQUIRED BY</b>	<input type="checkbox"/> FILER	<input checked="" type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE		
	<input type="checkbox"/> NET LOSS			

<b>BUSINESS ENTITY</b>	Chart Industries <span style="float: right;">NAME</span>			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input checked="" type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE		
	<input type="checkbox"/> NET LOSS			

<b>BUSINESS ENTITY</b>	International Paper Co. <span style="float: right;">NAME</span>			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input checked="" type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE		
	<input type="checkbox"/> NET LOSS			

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<b>1 BUSINESS ENTITY</b>	NAME Bear Stearnes Companies			
<b>2 STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>3 NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input checked="" type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>4 IF SOLD</b>	<input checked="" type="checkbox"/> NET GAIN			
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input checked="" type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>BUSINESS ENTITY</b>	NAME Ford Motor Co.			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input checked="" type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input checked="" type="checkbox"/> NET GAIN			
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input checked="" type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>BUSINESS ENTITY</b>	NAME Wachovia Corp 2nd New Company			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input checked="" type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN			
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>BUSINESS ENTITY</b>	NAME Windstream Corp			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN			
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>BUSINESS ENTITY</b>	NAME Clean Energy Fuels Corp			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN			
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

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<b>1 BUSINESS ENTITY</b>	NAME Exelixis Inc			
<b>2 STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>3 NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>4 IF SOLD</b>	<input type="checkbox"/> NET GAIN			
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>BUSINESS ENTITY</b>	NAME Freddie Mac			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN			
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>BUSINESS ENTITY</b>	NAME Himax Technologies, Inc			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN			
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>BUSINESS ENTITY</b>	NAME Morgan Stanley			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN			
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>BUSINESS ENTITY</b>	NAME CitiGroup			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN			
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

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<b>1 BUSINESS ENTITY</b>	NAME Diana Shipping, Inc			
<b>2 STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>3 NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>4 IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000—OR MORE

<b>BUSINESS ENTITY</b>	NAME Fannie Mae			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input checked="" type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000—OR MORE

<b>BUSINESS ENTITY</b>	NAME Fannie Mae			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input checked="" type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000—OR MORE

<b>BUSINESS ENTITY</b>	NAME Freddie Mac			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input checked="" type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000—OR MORE

<b>BUSINESS ENTITY</b>	NAME National City Corporation			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000—OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**STOCK****PART 2**☐ NOT APPLICABLE

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 BUSINESS ENTITY</b>	NAME Ford			
<b>2 STOCK HELD OR ACQUIRED BY</b>	<input type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input checked="" type="checkbox"/> DEPENDENT CHILD <u>1</u>	
<b>3 NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input checked="" type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>4 IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>BUSINESS ENTITY</b>	NAME Valero Energy CP			
<b>STOCK HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>NUMBER OF SHARES</b>	<input type="checkbox"/> LESS THAN 100	<input checked="" type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

**BONDS, NOTES & OTHER COMMERCIAL PAPER****PART 3**☐ NOT APPLICABLE

List all bonds, notes and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 DESCRIPTION OF INSTRUMENT</b>	Schwab Money Market Fund
<b>2 HELD OR ACQUIRED BY</b>	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>3 IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
<b>DESCRIPTION OF INSTRUMENT</b>	Dallas ISD Municipal Bond
<b>HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
<b>DESCRIPTION OF INSTRUMENT</b>	Gilry USD COPS Municipal Bond
<b>HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
<b>COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY</b>	

**BONDS, NOTES & OTHER COMMERCIAL PAPER****PART 3**☐ NOT APPLICABLE

List all bonds, notes and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE

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<b>1</b> DESCRIPTION OF INSTRUMENT	CA ST GO-1 Municipal Bond
<b>2</b> HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
<b>3</b> IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
DESCRIPTION OF INSTRUMENT	TX St TPK AU-A Municipal Bond
HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
DESCRIPTION OF INSTRUMENT	Menlo Pk CSD Municipal Bond
HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
<b>COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY</b>	

**BONDS, NOTES & OTHER COMMERCIAL PAPER****PART 3**☐ NOT APPLICABLE

List all bonds, notes and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 DESCRIPTION OF INSTRUMENT</b>	LA Arpts-C Municipal Bond
<b>2 HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>3 IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
<b>DESCRIPTION OF INSTRUMENT</b>	Golden ST TOB-A Municipal Bond
<b>HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
<b>DESCRIPTION OF INSTRUMENT</b>	Hanford UHSD Municipal Bond
<b>HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input checked="" type="checkbox"/> DEPENDENT CHILD <u>1</u>
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
<b>COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY</b>	

**MUTUAL FUNDS****PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 MUTUAL FUND	Pioneer Mid Cap Value (Class B) <span style="float: right;">NAME</span>		
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
3 NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 10,000 OR MORE	<input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE		

MUTUAL FUND	Pioneer Mid Cap Value (ClassA) <span style="float: right;">NAME</span>		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 10,000 OR MORE	<input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE		

MUTUAL FUND	American Funds:Investment Company A <span style="float: right;">NAME</span>		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 5,000 TO 9,999	<input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 10,000 OR MORE	<input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE		

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**MUTUAL FUNDS****PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 MUTUAL FUND	NAME Van Kampen Mid Cap Growth Fund A
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

MUTUAL FUND	NAME Van Kampen Mid Cap Growth Fund B
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

MUTUAL FUND	NAME Davis NY Venture Fund B
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**MUTUAL FUNDS****PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE

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1 MUTUAL FUND	Davis NY Venture Fund A NAME
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
3 NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

MUTUAL FUND	MFS Total Return Fund Class B NAME
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input checked="" type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

MUTUAL FUND	MFS Total Return Fund Class A NAME
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input checked="" type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**



**MUTUAL FUNDS****PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 MUTUAL FUND	NAME Oppenheimer Value Class A
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
3 NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

MUTUAL FUND	NAME Oppenheimer Value Class B
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input checked="" type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

MUTUAL FUND	NAME Alliance Bernstein Small
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**MUTUAL FUNDS****PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE

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1 MUTUAL FUND	BlackRock Mid Cap NAME
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input checked="" type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	Franklin Sm-Mid Cap Gr NAME
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
MUTUAL FUND	Nuveen Large Cap Value NAME
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**MUTUAL FUNDS****PART 4**☐ NOT APPLICABLE

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE

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1 MUTUAL FUND	NAME Putnam Vista Fund
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input checked="" type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 TO 9,999 <input type="checkbox"/> 10,000 OR MORE
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS****PART 5**☐ NOT APPLICABLE

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 SOURCE OF INCOME</b>	<b>NAME AND ADDRESS</b>  Reach Media  11760 Noel Rd Dallas, TX
<b>2 RECEIVED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>3 AMOUNT</b>	<input type="checkbox"/> \$500 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE

<b>SOURCE OF INCOME</b>	<b>NAME AND ADDRESS</b>  Merrill Lynch  2100 Ross Ave Dallas, TX
<b>RECEIVED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>AMOUNT</b>	<input type="checkbox"/> \$500 - \$4,999 <input checked="" type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>SOURCE OF INCOME</b>	<b>NAME AND ADDRESS</b>  The Investment Company of America - A  American Funds P.O. Box 659521 San Antonio, TX 78265-9521
<b>RECEIVED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>AMOUNT</b>	<input checked="" type="checkbox"/> \$500 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS****PART 5**☐ NOT APPLICABLE

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 SOURCE OF INCOME</b>	<b>NAME AND ADDRESS</b>  American National Bank  P.O. Box 223809 Dallas, TX 75222
<b>2 RECEIVED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>3 AMOUNT</b>	<input checked="" type="checkbox"/> \$500 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>SOURCE OF INCOME</b>	<b>NAME AND ADDRESS</b>  Bank of America  400 So Zang Blvd Dallas, TX 75208
<b>RECEIVED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>AMOUNT</b>	<input checked="" type="checkbox"/> \$500 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>SOURCE OF INCOME</b>	<b>NAME AND ADDRESS</b>  Diana Shipping Inc  Pendelis 16 175 64 Palaio Faliro Athens, Greece,
<b>RECEIVED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>AMOUNT</b>	<input checked="" type="checkbox"/> \$500 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS****PART 5**☐ NOT APPLICABLE

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 SOURCE OF INCOME</b>	<b>NAME AND ADDRESS</b>  Golden State TOB-A Municipal Bond
<b>2 RECEIVED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>3 AMOUNT</b>	<input checked="" type="checkbox"/> \$500 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**PERSONAL NOTES AND LEASE AGREEMENTS****PART 6**☐ NOT APPLICABLE

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Dallas National Bank (Note)
2 LIABILITY OF	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 GUARANTOR	
4 AMOUNT	<input type="checkbox"/> \$1,000 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Wells Fargo (Vehicle)
LIABILITY OF	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
GUARANTOR	
AMOUNT	<input type="checkbox"/> \$1,000 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	South Dallas Development Fund
LIABILITY OF	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
GUARANTOR	
AMOUNT	<input type="checkbox"/> \$1,000 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE
<b>COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY</b>	

**INTERESTS IN REAL PROPERTY****PART 7A**☐ NOT APPLICABLE

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of 'beneficial interest' and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>2 STREET ADDRESS</b> <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY AND STATE 320 S.R.L. Thornton formerly 511 Eds Dallas, TX 75203 Dallas
<b>3 DESCRIPTION</b> <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1 lot Dallas County
<b>4 NAMES OF PERSONS RETAINING AN INTEREST</b> <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	
<b>5 IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>STREET ADDRESS</b> <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY AND STATE 1537 Pleasant Run Desoto, TX Dallas County
<b>DESCRIPTION</b> <input type="checkbox"/> LOTS <input checked="" type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 5 acres Dallas County
<b>NAMES OF PERSONS RETAINING AN INTEREST</b> <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

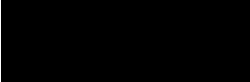
**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**



**INTERESTS IN REAL PROPERTY****PART 7A**☐ NOT APPLICABLE

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of 'beneficial interest' and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>2 STREET ADDRESS</b> <input type="checkbox"/> NOT AVAILABLE <input checked="" type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY AND STATE 
<b>3 DESCRIPTION</b> <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1 lot Dallas County
<b>4 NAMES OF PERSONS RETAINING AN INTEREST</b> <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	
<b>5 IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>STREET ADDRESS</b> <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY AND STATE 7318 Oakmore Dallas, TX Dallas County
<b>DESCRIPTION</b> <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1 lot Dallas County
<b>NAMES OF PERSONS RETAINING AN INTEREST</b> <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**INTERESTS IN BUSINESS ENTITIES****PART 7B**☐ NOT APPLICABLE

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of 'beneficial interest' and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>2 DESCRIPTION</b>	<div>NAME AND ADDRESS <input type="checkbox"/> (check if Filer's Home Address)</div> <p>West &amp; Gooden, P.C</p> <p>320 S.R.L. Thornton Suite 300 Dallas, TX 75203</p>
<b>3 IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>DESCRIPTION</b>	<div>NAME AND ADDRESS <input type="checkbox"/> (check if Filer's Home Address)</div> <p>Reach Media, Inc</p> <p>13760 Noel Dallas, TX 75240</p>
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

<b>HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>DESCRIPTION</b>	<div>NAME AND ADDRESS <input type="checkbox"/> (check if Filer's Home Address)</div> <p>Skyview Development LLC</p> <p>320 S.R.L. Thornton Dallas, TX 75203</p>
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**INTERESTS IN BUSINESS ENTITIES****PART 7B**☐ NOT APPLICABLE

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of 'beneficial interest' and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>2 DESCRIPTION</b>	<div>NAME AND ADDRESS <input type="checkbox"/> (check if Filer's Home Address)</div> <p>Radio One</p> <p>5900 Princess Garden Parkway 7th Floor Lanham, MD</p>
<b>3 IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
<b>HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>DESCRIPTION</b>	<div>NAME AND ADDRESS <input type="checkbox"/> (check if Filer's Home Address)</div> <p>West &amp; Associates LLP</p> <p>320 S.R.L. Thornton Freeway Suite 300 Dallas, TX 75203</p>
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
<b>HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>DESCRIPTION</b>	<div>NAME AND ADDRESS <input type="checkbox"/> (check if Filer's Home Address)</div> <p>Royce West &amp; Associates P.C.</p> <p>320 S.R.L. Thornton Freeway Suite 300 Dallas, TX 75203</p>
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
<b>COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY</b>	

**ASSETS OF BUSINESS ASSOCIATIONS****PART 11A**☐ NOT APPLICABLE

Describe all assets of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 BUSINESS ASSOCIATION</b>	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address)	
	Skyview Development LLC 320 S.R.L. Thornton Freeway Dallas, TX 75203	
<b>2 BUSINESS TYPE</b>	Real Estate Development: Limited Liability Company	
<b>3 HELD, ACQUIRED, OR SOLD BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4 ASSETS</b>	DESCRIPTION	CATEGORY
	Building	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**ASSETS OF BUSINESS ASSOCIATIONS****PART 11A**☐ NOT APPLICABLE

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 BUSINESS ASSOCIATION</b>	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address)									
	West & Associates LLP 320 S.R.L. Thornton Freeway Dallas, TX 75203									
<b>2 BUSINESS TYPE</b>	Limited Liability Partnership									
<b>3 HELD, ACQUIRED, OR SOLD BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____									
<b>4 ASSETS</b>	<table border="1"><thead><tr><th>DESCRIPTION</th><th>CATEGORY</th></tr></thead><tbody><tr><td>Property/Equipment</td><td><input checked="" type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE</td></tr><tr><td>Office Furniture</td><td><input checked="" type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE</td></tr><tr><td>Computer Equipment</td><td><input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input checked="" type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE</td></tr></tbody></table>		DESCRIPTION	CATEGORY	Property/Equipment	<input checked="" type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE	Office Furniture	<input checked="" type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE	Computer Equipment	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input checked="" type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
DESCRIPTION	CATEGORY									
Property/Equipment	<input checked="" type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE									
Office Furniture	<input checked="" type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE									
Computer Equipment	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input checked="" type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE									

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**ASSETS OF BUSINESS ASSOCIATIONS****PART 11A**☐ NOT APPLICABLE

Describe all assets of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 BUSINESS ASSOCIATION</b>	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address)	
	West & Gooden P.C. 320 S.R.L. Thornton Freeway Dallas, TX 75203	
<b>2 BUSINESS TYPE</b>	Professional Corporation	
<b>3 HELD, ACQUIRED, OR SOLD BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4 ASSETS</b>	DESCRIPTION	CATEGORY
	Property/Equipment	<input checked="" type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

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**ASSETS OF BUSINESS ASSOCIATIONS****PART 11A**☐ NOT APPLICABLE

Describe all assets of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

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<b>1 BUSINESS ASSOCIATION</b>	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address) Royce West & Associates P.C.  320 S.R.L. Thornton Freeway Suite 300 Dallas, TX 75203	
<b>2 BUSINESS TYPE</b>	Professional Corporation	
<b>3 HELD, ACQUIRED, OR SOLD BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4 ASSETS</b>	DESCRIPTION No Assets	CATEGORY <input checked="" type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

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**LIABILITIES OF BUSINESS ASSOCIATIONS****PART 11B**☐ NOT APPLICABLE

Describe all liabilities of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the liabilities. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 BUSINESS ASSOCIATION</b>	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address)							
	Skyview Development LLC 320 S.R.L. Thornton Freeway Dallas, TX 75203							
<b>2 BUSINESS TYPE</b>	Limited Liability Company							
<b>3 HELD, ACQUIRED, OR SOLD BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____							
<b>4 LIABILITIES</b>	<table border="1"><thead><tr><th>DESCRIPTION</th><th>CATEGORY</th></tr></thead><tbody><tr><td>Debt</td><td><input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE</td></tr><tr><td>Tenant Deposits</td><td><input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input checked="" type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE</td></tr></tbody></table>		DESCRIPTION	CATEGORY	Debt	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE	Tenant Deposits	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input checked="" type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
DESCRIPTION	CATEGORY							
Debt	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE							
Tenant Deposits	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input checked="" type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE							

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**



**LIABILITIES OF BUSINESS ASSOCIATIONS****PART 11B**☐ NOT APPLICABLE

Describe all liabilities of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the liabilities. For more information, see FORM PFS—INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1 BUSINESS ASSOCIATION</b>	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address)	
	West & Associates LLP 320 S.R.L. Thornton Suite 300 Dallas, TX 75203	
<b>2 BUSINESS TYPE</b>	Limited Liability Partnership	
<b>3 HELD, ACQUIRED, OR SOLD BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4 LIABILITIES</b>	DESCRIPTION	CATEGORY
	Client Trust Acct	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000—OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**BOARDS AND EXECUTIVE POSITIONS****PART 12**☐ NOT APPLICABLE

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 ORGANIZATION	West & Gooden P.C.
2 POSTITION HELD	President
3 POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
ORGANIZATION	Tom Joyner Foundation, Inc
POSTITION HELD	Secretary
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
ORGANIZATION	Skyview Development LLC
POSTITION HELD	President
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
ORGANIZATION	Reach Media, Inc
POSTITION HELD	Secretary
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____
ORGANIZATION	West & Associates
POSTITION HELD	Managing Partner
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**BOARDS AND EXECUTIVE POSITIONS****PART 12**☐ NOT APPLICABLE

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 ORGANIZATION	Royce West & Associates, PC
2 POSITION HELD	President
3 POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____

ORGANIZATION	Circle Ten Council of Boy Scouts of America
POSITION HELD	Vice President Scout Reach
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____

ORGANIZATION	Black America Web Relief Fund
POSITION HELD	Secretary
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____

ORGANIZATION	Education is Freedom
POSITION HELD	Board Member
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD ____

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

# FEES RECEIVED FOR SERVICES RENDERED TO A LOBBYIST OR LOBBYIST'S EMPLOYER

**PART 15**
☐ NOT APPLICABLE

Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	Texas Instruments
2 FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	Countrywide Financial Corporation
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	Linebarger, Goggan Blair & Sampson
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	Wells Fargo Bank NA
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	Baylor Health Care Systems
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input checked="" type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	First Southwest Company
FEE CATEGORY	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE

**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

**FEES RECEIVED FOR SERVICES RENDERED  
TO A LOBBYIST OR LOBBYIST'S EMPLOYER****PART 15**☐ NOT APPLICABLE

Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFS--INSTRUCTION GUIDE.

**1 PERSON OR ENTITY  
FOR WHOM SERVICES  
WERE PROVIDED**

Bank of America

**2 FEE CATEGORY**☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☒ \$25,000--OR MORE**PERSON OR ENTITY  
FOR WHOM SERVICES  
WERE PROVIDED**

Citigroup Global Market, Inc

**FEE CATEGORY**☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☒ \$10,000 - \$24,999 ☐ \$25,000--OR MORE**PERSON OR ENTITY  
FOR WHOM SERVICES  
WERE PROVIDED**

City of Dallas

**FEE CATEGORY**☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☒ \$25,000--OR MORE**COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

## PERSONAL FINANCIAL STATEMENT

### PARTS MARKED 'NOT APPLICABLE' BY FILER

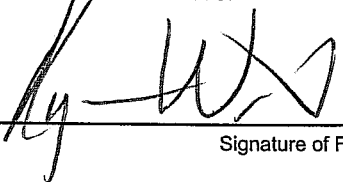
Rather than printing a page for each Part the filer checked 'Not Applicable,' this page summarizes whether the 'Not Applicable' checkbox was checked for each Part. If the checkbox is checked next to a Part below, then no pages for that Part should be present in the report. If a checkbox is not checked, then pages for that Part should be present in the report.

- ☐ N/A Part 1A - Sources of Occupational Income
- ☐ N/A Part 1B - Retainers
- ☐ N/A Part 2 - Stock
- ☐ N/A Part 3 - Bonds, Notes & Other Commercial Paper
- ☐ N/A Part 4 - Mutual Funds
- ☐ N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
- ☐ N/A Part 6 - Personal Notes and Lease Agreements
- ☐ N/A Part 7A - Interests in Real Property
- ☐ N/A Part 7B - Interests in Business Entities
- ☒ N/A Part 8 - Gifts
- ☒ N/A Part 9 - Trust Income
- ☒ N/A Part 10A - Blind Trusts
- ☒ N/A Part 10B - Trustee Statement
- ☐ N/A Part 11A - Assets of Business Associations
- ☐ N/A Part 11B - Liabilities of Business Associations
- ☐ N/A Part 12 - Boards and Executive Positions
- ☐ N/A Part 13 - Expenses Accepted Under Honorarium Exception
- ☐ N/A Part 14 - Interest in Business in Common with Lobbyist
- ☐ N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
- ☒ N/A Part 16 - Representation by Legislator Before State Agency
- ☒ N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
- ☒ N/A Part 18 - Legislative Continuances

**PERSONAL FINANCIAL STATEMENT AFFIDAVIT**

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, **2008**, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

  
\_\_\_\_\_  
Signature of Filer



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by Brandi J. Lowery this the 24<sup>th</sup> day of June, 2009,  
to certify which, witness my hand and seal of office.

Brandi J. Lowery Brandi J. Lowery paralegal/notary public  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath